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October 5, 1999

Application Processing Division
Customer Correction Branch
Commissioner of Patents and Trademarks
Washington, D.C. 20231

Re: **Serial No.: 09/384,650**
Applicant: James A. Michael, et al.
Docket No.: D-1079 DIV

Sir:

An error was noted on the Filing Receipt for the above application. The correction has been made on the attached sheet.

If you have any questions, please give me a call.

Very truly yours,

Ralph E. Jocke

REJ:jgm

CERTIFICATE OF MAILING

I hereby certify that this document and the documents indicated as enclosed herewith are being deposited with the U.S. Postal Service, postage prepaid as First Class Mail, in an envelope addressed to Application Processing Division, Customer Correction Branch, Commissioner of Patents and Trademarks, Washington, D.C. 20231 this 5th day of October 1999.

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FILING RECEIPT



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/384,650	08/27/99	3651	\$892.00	D-1079-DIV	18	23	4

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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) JAMES A. MICHAEL, CRANBERRY TOWNSHIP, PA; DAVID T. FREDERICK, NORTH HUNTINGTON, PA; H. THOMAS GRAEF, BOLIVAR, OH.

CONTINUING DATA AS CLAIMED BY APPLICANT-

PROVISIONAL APPLICATION NO. 60/045,137 04/30/97
Division of 08/879,997 FILED 07/20/97

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 09/13/99

TITLE

APPARATUS FOR DISPENSING MEDICAL ITEMS

PRELIMINARY CLASS: 221

DATA ENTRY BY: DILLON, LAWANDA

TEAM: 03 DATE: 09/13/99

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(See reverse for new important information)

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SERIAL NUMBER 09/384,650	FILING DATE 08/27/99	CLASS 221	GROUP ART UNIT 3651	ATTORNEY DOCKET NO. D-1079-DIV
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APPLICANT
JAMES A. MICHAEL, CRANBERRY TOWNSHIP, PA; DAVID T. FREDERICK,
NORTH HUNTINGTON, PA; H. THOMAS GRAEF, BOLIVAR, OH.

****CONTINUING DOMESTIC DATA*******
 VERIFIED THIS APPLN IS A DIV OF 08/879,997 06/20/97
 PROVISIONAL APPLICATION NO. 60/045,137 04/30/97

****371 (NAT'L STAGE) DATA*******
 VERIFIED

****FOREIGN APPLICATIONS*******
 VERIFIED

 IF REQUIRED, FOREIGN FILING LICENSE GRANTED 09/13/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY PA	SHEETS DRAWING 18	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
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Verified and Acknowledged Examiner's Initials _____ Initials _____

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TITLE
APPARATUS FOR DISPENSING MEDICAL ITEMS

FILING FEE RECEIVED \$892	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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